

PROGRAM BOOK



KONAS
KONGRES NASIONAL
ke - 12
& Pertemuan Ilmiah
Tahunan ke - 35
SEMARANG
2010



12th National Congress



**35th Annual Scientific
Meeting of Indonesian
Ophthalmologist
Association**

Special Joint Meeting with The Singapore Society Of Ophthalmology

July 23th - 26th, 2010

Patra Convention Hotel & Gumaya Hotel

Semarang, Indonesia



Indonesian Ophthalmologist Association



Perhimpunan Dokter
Spesialis Mata Indonesia



TABLE OF CONTENTS.....	1
WELCOME MESSAGE.....	3
Welcome Messages - President of Indonesian Ophthalmology Association (IOA).....	4
Welcome Messages - Chairman of the 35 th Annual Meeting IOA	5
ORGANIZING COMMITTEE	6
PERDAMI COUNCIL COMMITTEE	8
GENERAL INFORMATION	10
SCIENTIFIC INFORMATION	13
BIOGRAPHY OF ISAK SALIM	16
AWARD	18
List of Award Recipients of Indonesia Ophtalmologist	19
Award of Prof. DR. Dr. Isak Salim	19
Award of KONAS Committee	19
Award of Purna Bakti	19
LIST OF NEW OPHTALMOLOGIST GRADUATED.....	20
VENUE MAP	25
Scientific Meeting Room Map	27
Exhibition Booth Room Map	28
PROGRAM BOOK CODE	31
SCIENTIFIC SECTION.....	33
Program At A Glance	34
Scientific Program	36
▪ Day 0	36
▪ Day 1	41
▪ Day 2	51
▪ Day 3	31
FREE PAPER ABSTRACT.....	55
POSTER ABSTRACT.....	101
POSTER SCHEDULE	164
ACKNOWLEDGMENT (Sponshorship / Institution).....	172
ABOUT SEMARANG.....	177
MAP OF SEMARANG.....	181

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MALIAWAN

Wet Lab Cataract 01 (WL Cat 01)

Wet Lab Cataract 02 (WL Cat 02)

Day 0

July 23th 2010, Friday

10.00 - 16.00

Time	Name	Speaker topic
Wet Lab Cataract 01		Course Director : Johan A. Hutaaruk, MD
10.30 - 11.30	Sysku Widyawati, MD	
Instructor :	Bambang Triwiyono, MD	
	Cokorda I Dewiyani, MD	
	Liesa Zulhidya, MD	
11.30 - 13.30	LUNCH BREAK & PRAY	
Wet Lab Cataract 02		Course Director : Vidyapati W. Mangunkusumo, MD
13.30 - 16.00	Hidayat, MD	
Instructor :	Hilman Hitam, MD	
	Riana Azmi, MD	
	Lucia S. Sutedja, MD	

Scientific Program
Day - 1

PONCOWATI I, II, III

Isak Salim Memorial Lecture

Plenary

Day 1

08.00 - 09.20

July 24th 2010, Saturday

Time	Name	Speaker topic	Code
Plenary			
08.00 - 08.30	Nila F. Moeloek, MD	Isak Salim Memorial Lecture : perkembangan penanganan tumor mata di Indonesia	PL 1
08.30 - 09.00	Budi Sampurna, MD	Sosialisasi UU Kesehatan baru No 36/2009	PL 2
09.00 - 09.15		Opening Ceremony	
09.15 - 09.20		Opening Exhibition	

PONCOWATI I

Symposia Entrepreneurship (SY EN 01)

Symposia Infection Immunology 02 (SY II 02)

Day 1

14.00 - 17.30

July 24th 2010, Saturday

Time	Name	Speaker topic	Code
Symposia Entrepreneurship (EN 01)		Moderator :Tjahjono D. Gondhowiardjo, MD Co-Moderator :Gilbert Simanjuntak, MD	
14.00 - 14.22	Indriani Pudjiastuti, MD	How to start our own clinic	SY 1
14.22 - 14.44	Gatut Suhendro, MD	Management of Surabaya Eye Centre	SY 2
14.44 - 15.06	Tjahjono D. Gondhowiardjo, MD	Strategic Planning in Personal's Professional Development	SY 3
15.06 - 15.28	Permata Taufik Hidayatun	Fasilitas pinjaman bank	SY 4
15.30 - 16.00	COFFEE BREAK		
Symposia Infection Immunology (II 02)		Moderator :Wisnujono S, MD Co-Moderator :Made Susyanti, MD	
Recent Advances in Ocular Surface Inflammation			
16.00 - 16.18	Victor Caparas, MD	Ocular Surface Disease and Preservatives in Eye drops	SY 5
16.18 - 16.36	Havriz Vitresia, MD	Management of Stevens-Johnson Syndrome : clinical experience with AMT, buccal mucosa	SY 6
16.36 - 16.54	Rukiah Syawal, MD	Dry Eye:why so prevalent?Common clinical presentation	SY 7
16.54 - 17.12	Rosy Aldina, MD	Hormonal Regulation as Therapy for Dry Eye	SY 8
17.12 - 17.30	Khairidjan, MD	Managing recurrent corneal erosion	SY 9

Scientific Program Day - 1

RAMAYANA I, II
Symposia Cataract 01 (SY CAT 01)

Day 1
July 24th 2010, Saturday

Time	Name	Speaker topic	Code
14.00-17.30			
Symposia Cataract 01		Moderator :Sjamsoc Boediono, MD	
Managing complications and challenging cases in Phacoemulsification		Co-Moderator :Harka Prasetya, MD	
14.00 - 14.11	Wasidi Gunawan, MD	The Simple Management of Posterior Capsule Rupture Associated With Vitreous Prolaps in Phacoemulsification	SY 35
14.11 - 14.22	Christopher Khng, MD	IOL Fixation Option in the Absence of Capsule Support	SY 36
14.22 - 14.33	Sjamsoc Boediono, MD	Phacoemulsification in White Cataracts	SY 37
14.33 - 14.44	Istantoro, MD	How to manage power efficiency & chamber stability in hard cataract cases	SY 38
14.44 - 14.55	Amir Shidik, MD	Deep six : how to avoid	SY 39
14.55 - 15.06	Sudeep Das, MD	Micro-coaxial Phaco in challenging cases - Rockhard cataract, small pupils	SY 40
15.06 - 15.17	Erlangga A. Mangunkusumo, MD	Glue and tutopatch application in scleral fixated pc iol	SY 41
15.17 - 15.28	Sriganesh, MD	Bimanual Microphaco with Signature Ellips for Hard & White Cataracts	SY 42
COFFEE BREAK			
Symposia Cataract 02		Moderator :Istantoro, MD	
Advances in Intraocular Lens		Co-Moderator :Norma Handoyo, MD	
16.00 - 16.11	Istantoro, MD	Spectacles independence aspheric multifocal IOLs	SY 43
16.11 - 16.22	Ho Yi Tao, MD	Advancement in IOL Material and Design	SY 44
16.22 - 16.33	Victor Caparas, MD	Multi-focal IOLs, how does it help my practice?	SY 45
16.33 - 16.44	Sudeep Das, MD	Transitioning to Multifocal and Toric IOLs in ones practice - Why & How?	SY 46
16.44 - 16.55	Johan A. Hutaaruk, MD	Accommodative intraocular lens	SY 47
16.55 - 17.06	Khairidjan, MD	Understanding Premium IOL technology - Back to Basic	SY 48
17.06 - 17.17	Ho Yi Tai, MD	Blue Light Filtering, is this a Myth?	SY 49
17.17 - 17.28	Budiman, MD	Phakic IOL	SY 50

RAMAYANA III, IV
Symposia Retina 01 (SY RET 01)
Symposia Retina 02 (SY RET 02)

Day 1
July 24th 2010, Saturday

Time	Name	Speaker topic	Code
14.00-17.30			
Symposia Retina 01		Moderator :Elvioza, MD	
Diabetic Retinopathy and AMD Update		Co-Moderator :Khalilulrahman, MD	
14.00 - 14.15	Moestidjab, MD	The role of anti VEGF in Diabetic Retinopathy and Age Related Macular Degeneration	SY 51
14.15 - 14.30	Nadya, MD	How to prevent Diabetic Retinopathy	SY 52
14.30 - 14.45	Gitalisa, MD	Polypoidal Choroidal Vasculopathy In Indonesia	SY 53
14.45 - 15.00	Elvioza, MD	Subthreshold photocoagulation in Diabetic Retinopathy	SY 54
15.00 - 15.15	Adrian Koh, MD	Newest treatment in Diabetic Retinopathy	SY 55
15.15 - 15.30	Adrian Koh, MD	Newest treatment in AMD	SY 56
COFFEE BREAK			
Symposia Retina 02		Moderator :Ari Djatikusumo, MD	
Current Trends in Vitreoretinal Surgery		Co-Moderator :Djonggi Panggabean, MD	
16.00 - 16.15	Sudarman, MD	Retinal Detachment, Buckle vs Primary Vitrectomy	SY 57
16.15 - 16.30	Ari Djatikusumo, MD	Phaco-Vitrect in Vitreoretinal surgery	SY 58
16.30 - 16.45	Gilbert, MD	ILM Peeling, choices of dyes	SY 59
16.45 - 17.00	Sjakon Tahija, MD	Sutureless Vitreous Surgery for Complicated cases	SY 60
17.00 - 17.15	Habibah, MD	Vitrectomy for intractable Diabetic Macular Edema	SY 61
17.15 - 17.30	Eko Karim, MD	Redetachment, treatment options	SY 62

ILM Peeling

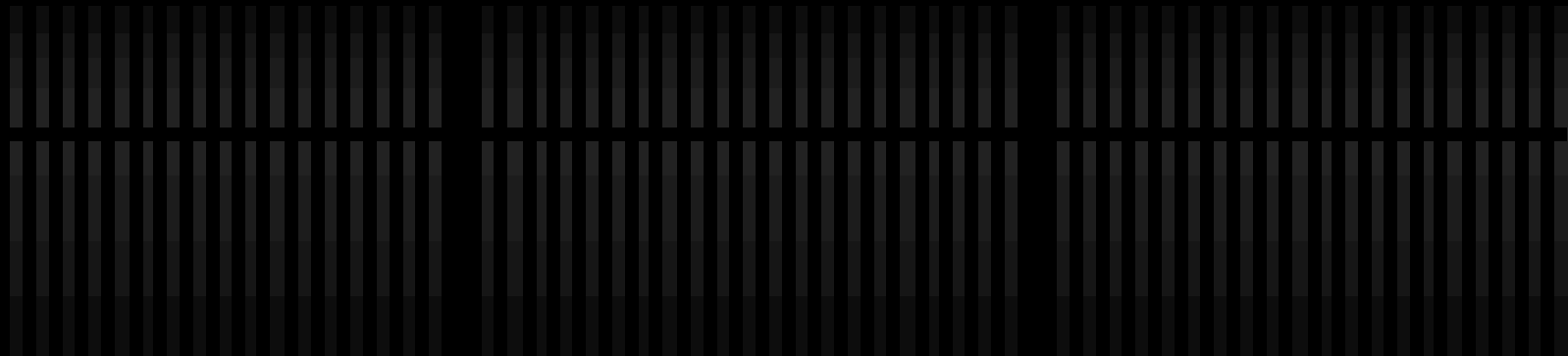
Choice of dyes



Gilbert WS Simanjuntak, Jannes F Tan, HHB Mailangkay,
Helario Hasibuan, Jusuf Wijaya

Cikini Eye Institute/Cikini CCI Hospital
Dept. of Ophthalmology Medical Faculty UKI
Jakarta, Indonesia

no financial interest in items discussed



Milestone

- ✓ Kelly and Wendel (Arch Ophthalmol 1991), landmark of vitreous surgery to close the hole (anatomic success) and improve visual acuity (functional success)
 - ✓ Additional report research and refinements
- ✓ The ILM is a very thin and semitransparent basement membrane of 2.5 micron in thickness.
- ✓ Such delicate structure may be difficult to identify during vitreoretinal surgery.

Milestone (contd)

- ✓ Successful ILM peeling to treat idiopathic MH first was described in 1997

Eckardt C, Eckardt U, Groos S, Luciano L, Reale E.

Ophthalmologie 1997;94:545–551.

- ✓ After this, closure rates in MH surgeries of approximately 95% were reported, compared with lower closure rates in eyes without ILM peeling.

Rodrigues EB, Meyer CH, Farah ME, Kroll P. Ophthalmologica 2005;219:251–262.

Mester V, Kuhn F. Am J Ophthalmol 2000;129:769–777.

Chromovitrectomy

- ✓ ~ the use of vital dyes or crystals to improve the visualization of intraocular tissues during vitrectomy
- ✓ Arises from difficulty to remove thin transparent tissue (posterior hyaloid and ILM)
 - ✓ ILM is a very thin and semitransparent basement membrane of 25 μ in thickness.
 - ✓ To stain vitreous, ERM or ILM
 - ✓ Vital (staining living tissue or cells) and non-vital dyes
- ✓ The goal of staining is avoiding ocular complications related to ILM peeling, poor removal of the vitreous, and incomplete removal of the ERM.
- ✓ ILMP induce gliosis formation, iatrogenic chorioretinopathy, light toxicity

CONTROVERSIES

ILM Peeling

- ✓ To peel or not to peel
- ✓ When to peel

Dye

- ✓ ICG
- ✓ Trypan Blue
- ✓ Brilliant Blue
- ✓ Triamcinolone acetate

Safety

- ✓ Illumination

Important issues

- ✓ Complete removal of vitreous from posterior pole
 - ✓ Staining of the vitreous
- ✓ Complete removal of ILM from macular area
 - ✓ ?how large
- ✓ Less injury and to consider the size of lesion/hole

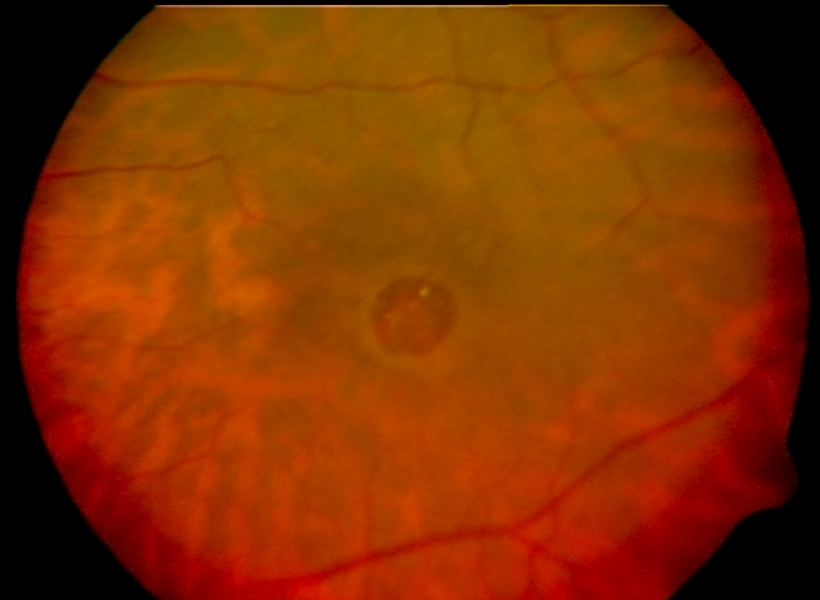


Table 1. Concentration and properties of dyes

Substance	Dilution/Osmolarity	Affinity for Intraocular Structures	Avoiding RPE/Retinal Toxicity	High Cost	Chemical Properties
Triamcinolone acetonide 40 mg/ml 4%	No dilution	Vitreous	Use a preservative-free solution	+	Triamcinolone is a synthetic nonsoluble steroid (C ₂₄ H ₃₁ FO ₆ ; 434 daltons)
Trypan blue 1.2 mg/ml 0.12%	No dilution or mix with glucose 1.2 mg/ml (0.12%)/310 mOsm	ERM	Use with no dilution or mix 0.3 ml with 0.1 ml glucose 5% for better ERM identification	+	Trypan blue is an anionic hydrophilic azo dye (C ₃₄ H ₂₄ N ₆ Na ₄ O ₁₄ S ₄ ; 960 daltons)
Patent blue 2.5 mg/ml 0.25%	No dilution or mix with glucose 2.5 mg/ml (0.25%)/290 mOsm	ERM	Use with no dilution or mix 0.3 ml with 0.1 ml glucose 5% for better ERM identification	++	Patent blue is a triarylmethane dye (C ₂₇ H ₃₁ N ₂ NaO ₆ S ₂ ; 582 daltons)
Brilliant blue 0.25 mg/ml 0.025%	No dilution/280 mOsm	ILM	Use with dilution	+++	Brilliant blue is a blue anionic aminotriarylmethane compound (C ₄₇ H ₄₈ N ₃ S ₂ O ₇ Na; 854 daltons)
Indocyanine green 5 mg, 0.5%; 25 mg, 2.5%; 50 mg, 5.0%	Less than 0.5 mg/ml (0.05%) Dissolve in small amount of distilled water. Dilution: use large amount of BSS	ILM	Add 1 ml distilled water to 1 vial 5 mg Take 0.1 ml of the solution and mix with 0.9 ml BSS	++++	Indocyanine green is a tricarboyanine dye (C ₄₃ H ₄₇ N ₂ NaO ₆ S ₂ ; 775 daltons) and contains 3% to 5% iodine
Infracyanine green 5 mg, 0.5%, 25 mg, 2.5%	Less than 0.5 mg/ml (0.05%) Dissolve in glucose 5%/290 mOsm	ILM	Add 1 or 2 ml glucose 5% to 1 vial of 5 mg	+++++	Infracyanine green has the same chemical formula as ICG but contains no sodium iodine

BSS = balanced salt solution; ERM = epiretinal membrane; ICG = indocyanine green; ILM = internal limiting membrane; RPE = retinal pigment epithelium.

SURGICAL TECHNIQUE

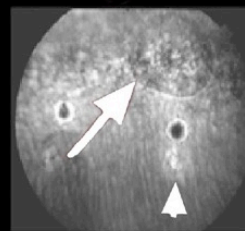
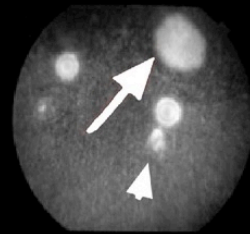
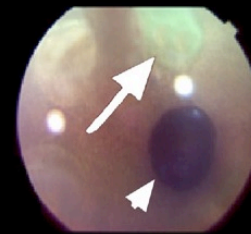
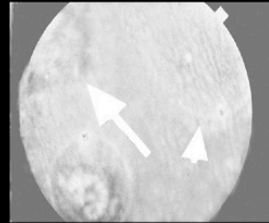
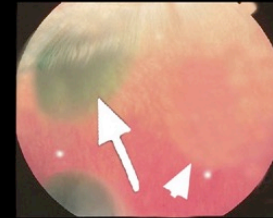
TA : The surgical technique reported so far for TA application consists in a simple injection of 0.1 IN 0.5 ml BSS of the agent at a concentration of 10 OR 40 mg/ml (4%) into the vitreous cavity directed toward the area to be visualized.

Alternative of vitreous staining : ICG, TB, and sodium fluorescein

Contd.

ICG with light exposure caused a significant increase in the biomechanical stiffness of the ILM, thereby facilitating its peeling. (+ TTT)

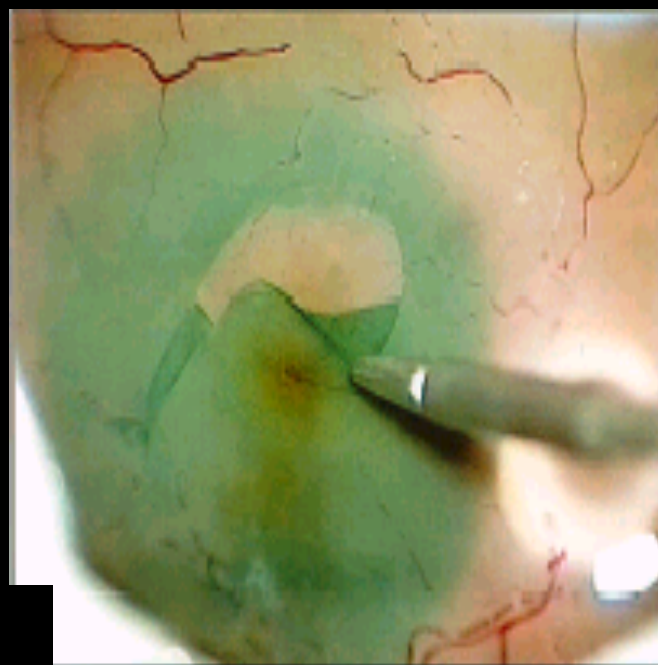
- can remain intravitreally or can deposit persistently on the optic disc after MH surgery.
- can diffuse to the subretinal space through the MH, causing RPE damage



Ophthalmology 2007;114:899–908

the presumed safer infracyanine green profile may represent an alternative for ICG use during ILM peeling in chromovitrectomy because of the lack of sodium iodine in its formulation and physiologic osmolarity.

Penha FM, Maia M, Farah ME, et al.
J Ocul Pharmacol Ther 2008;24:52– 61.



✓ Other dyes

Blood

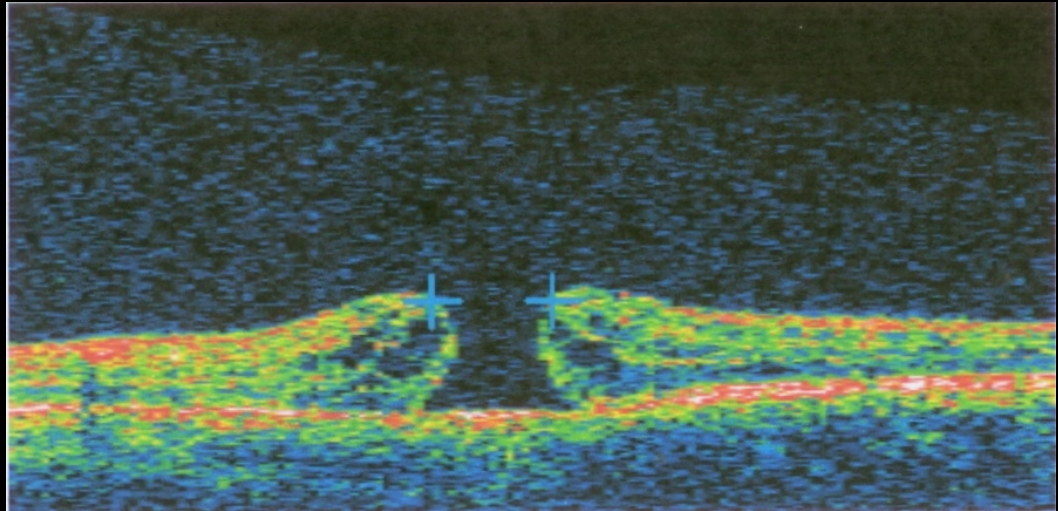
- Personal experience
- Genuine **vs** me-too

Double staining in M Hole Surgery

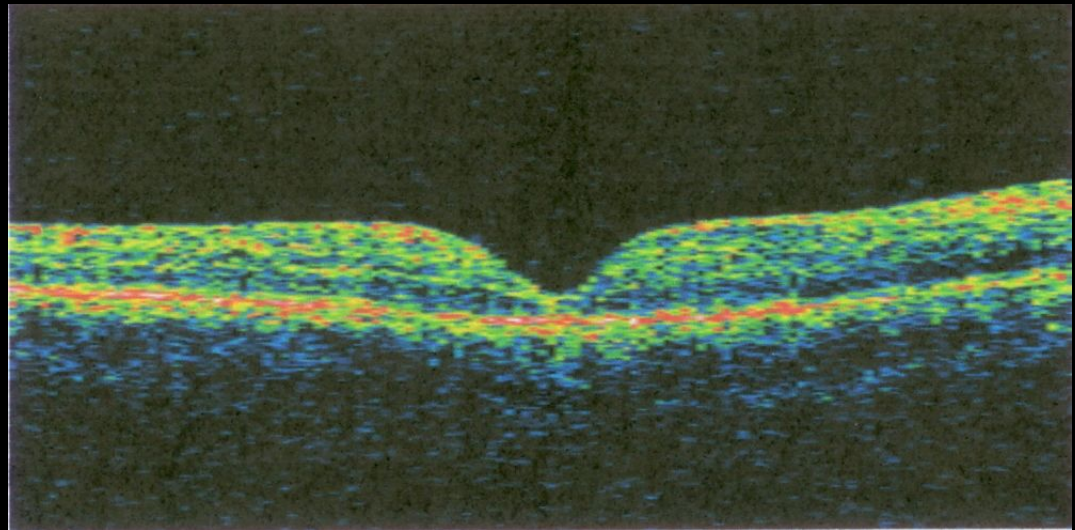
Sutureless 20-G and 26-G

H/O DOV 6
mos

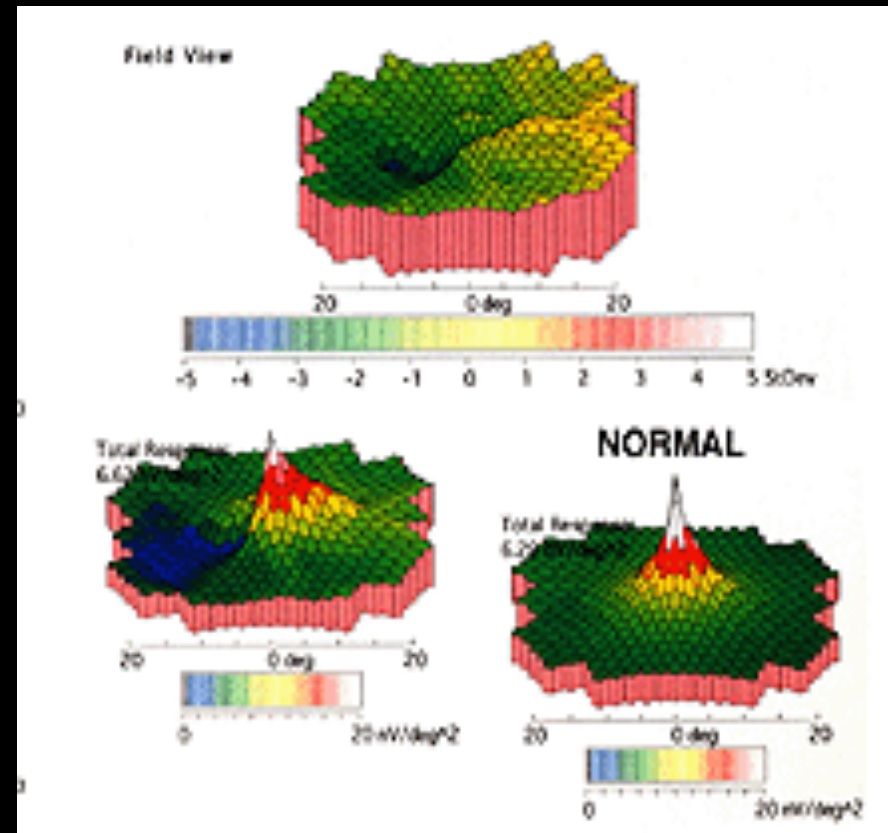
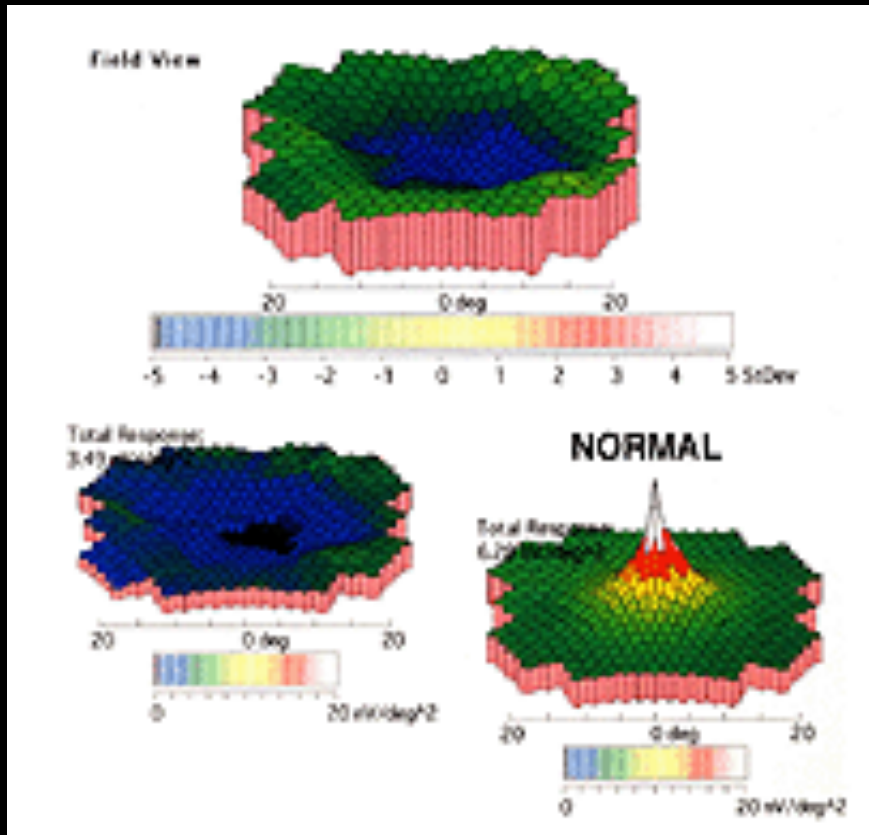
Preop-REVA
20/200



Postop-REVA
20/40



mfERG Findings



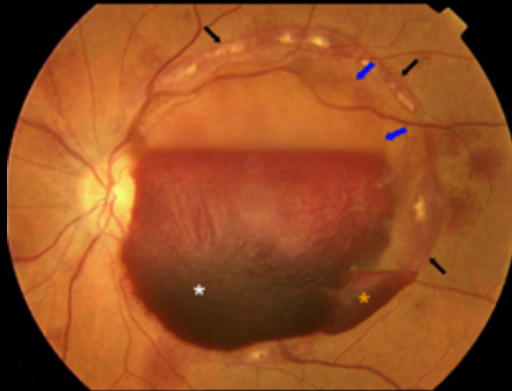
Anatomic and VA result

First author	M Hole closed (%)	VA change (line)	Better ≥ 2 lines (%)
Kelly (1991)	30/52 (58)	+3.5	22/52 (42)
Wendel (1993)	125/127 (73%)	NR	95/170 (56)
Glaser (1992)	11/11 (100)	NR	10/11 (91)
Lansing (1993)	22/23 (95.7)	+3.8	19/23 (83)
Orrelana (1993)	7/12 (58)	NR	8/12 (67)
Smiddy (1993)	53/58 (91)	NR	NR
Thompson (1994)	85/90 (94)	+2.6	NR
Ryan (1994)	36/48 (75)	NR	25/46 (54)
Liggett (1995)	11/11 (100)	+4.7	11/11 (100)
Korobelnik (1996)	7/8 (88)	NR	4/8 (50)
Thompson (1996)	84/120 (70)	+1.5	53/120 (44)
<i>RS Cikini (2009,IMH)</i>	<i>10/10 (100)</i>	<i>NR</i>	<i>9/10 (90)</i>

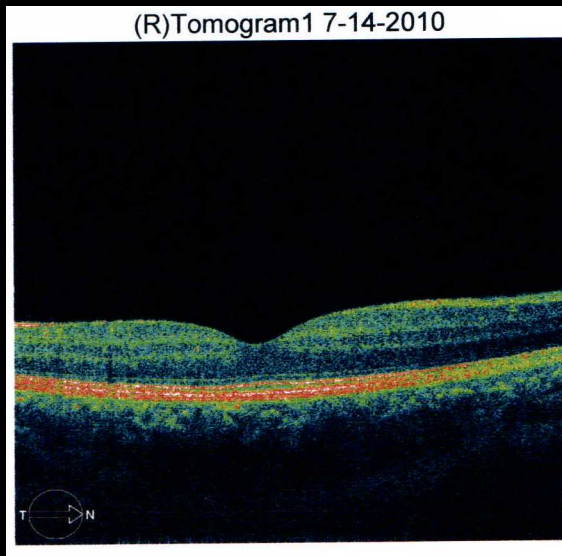
Unclear questions

- ✓ ?Is it due to toxicity
- ✓ ?What is the result of peeling without any dye(s)

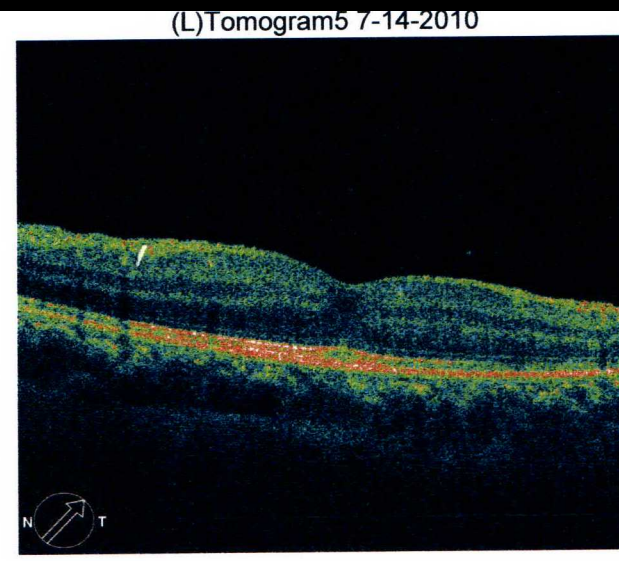
OCT after ILMP without dye



LEVA FC 1m

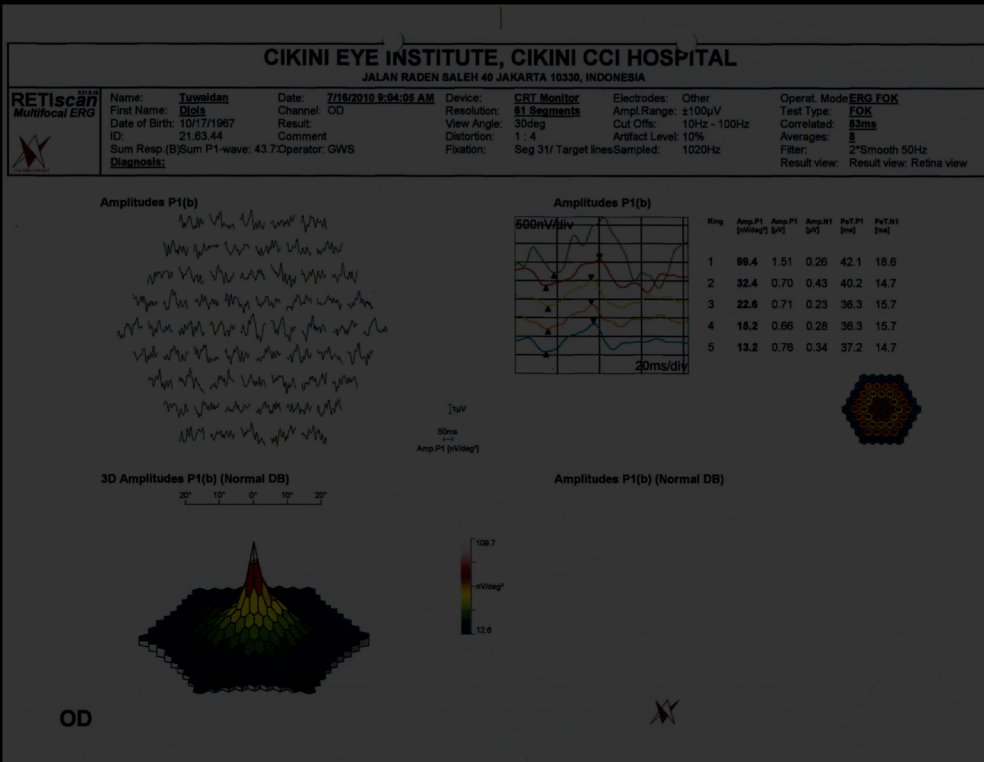


REVA 1.0

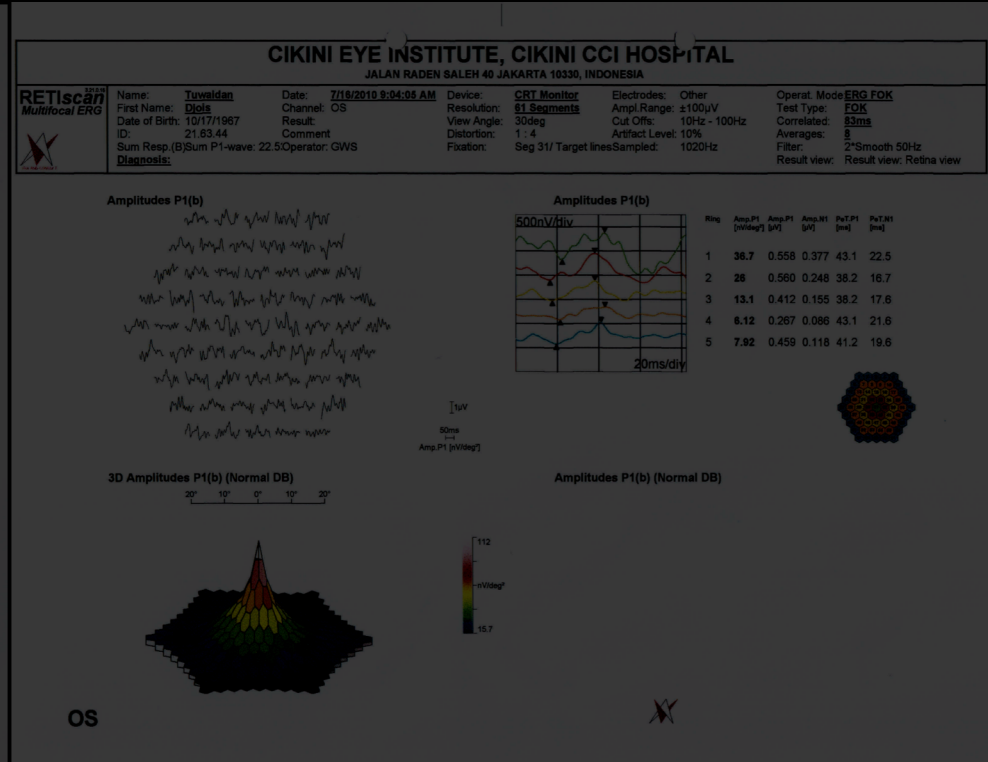


LEVA 1.0
After 2 wks

ERG after ILM without dyes



REVA 1.0



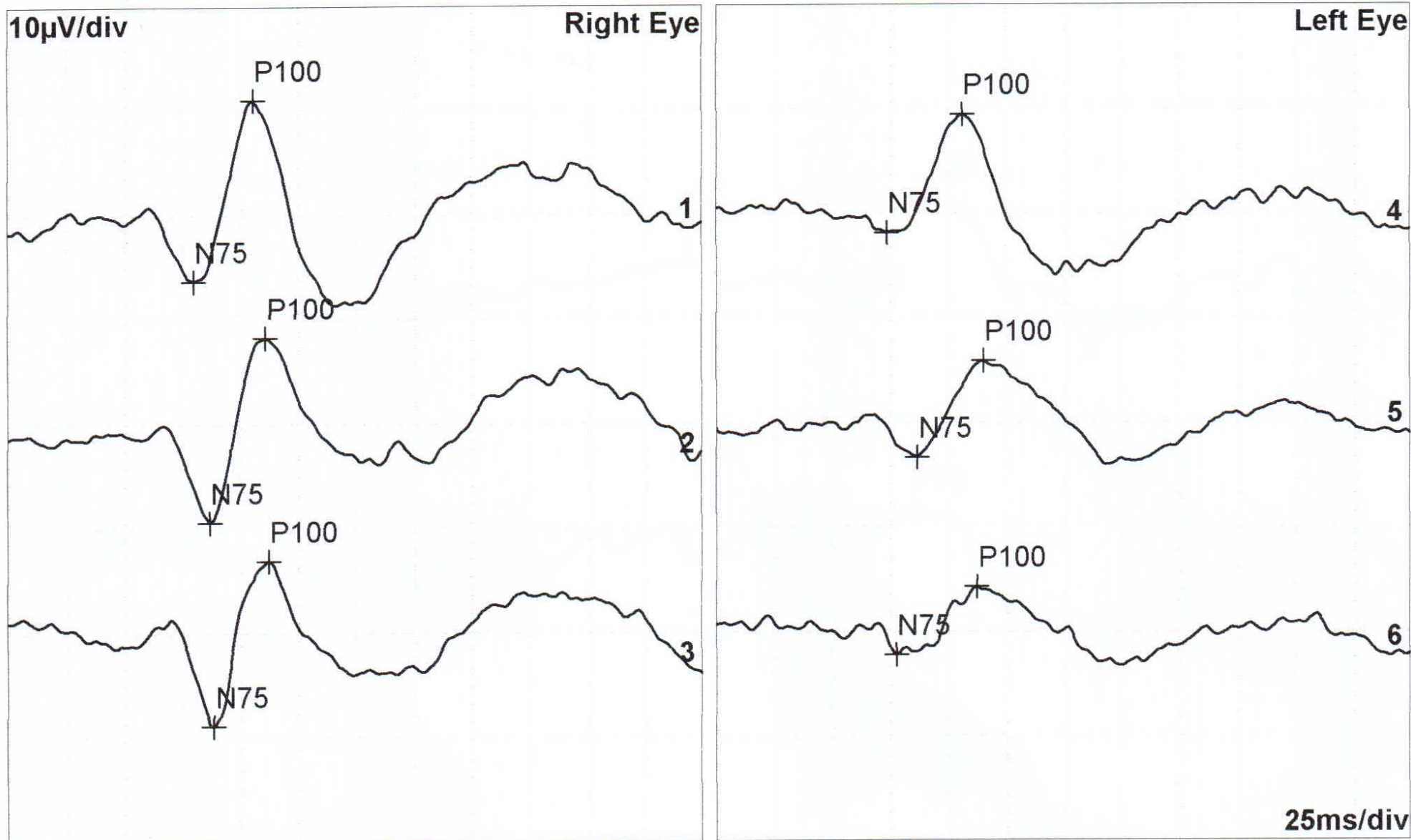
LEVA 1.0



Patient: [REDACTED]
Tested: 7/16/2010 7:36:24 AM
ID: 21.63.44

Sex/Age: M/42
Operator: Dr. Gilbert WS Simanjuntak
Electrode: EEG-GoldCup
Pupil Size: nondil.

Pattern-VEP



THANK YOU



CERTIFICATE OF ATTENDANCE

This is to certify that

Gilbert W Simanjuntak, MD

has attended as

Participant

12TH NATIONAL CONGRESS & 35TH ANNUAL SCIENTIFIC MEETING OF INDONESIAN OPHTHALMOLOGIST ASSOCIATION

SPECIAL JOINT MEETING WITH THE SINGAPORE SOCIETY OF OPHTHALMOLOGY

Dr. Suwido Magnadi, SpM

Chairman

Semarang July 23 - 26, 2010



Dr. Tjahjono D. Gandhowiardjo, SpM, PhD.

PERDAMI President

